

INDIAN AFFAIRS

DIRECTIVES TRANSMITTAL SHEET

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30 IAM 13	Medication Administration at BIE-operated Schools and Dormitories	#16-4
FOR FURTHER INFORMATION		DATE
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EXPLANATION OF MATERIAL TRANSMITTED:

The Bureau of Indian Education (BIE) recognizes that some children and adolescents are able to attend school outside of the home because of the effectiveness of medications in the treatment of certain disabilities and illnesses. It is preferred that all medication be administered at home. However, when medication must be administered at school, the BIE requires that all BIE operated schools adopt this Policy regarding both prescription and over-the-counter (OTC) drugs.



Dr. Charles Roessel
Director, Bureau of Indian Education

FILING INSTRUCTIONS:

Insert: 30 IAM 13, #16-4

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1.1 Purpose. The Bureau of Indian Education (BIE) recognizes that some children and adolescents are able to attend school outside of the home because of the effectiveness of medications in the treatment of certain disabilities and illnesses. It is preferred that all medication be administered at home. However, when medication must be administered at school, the BIE requires that all BIE-operated schools adopt this policy regarding both prescription and over-the-counter (OTC) drugs.

1.2 Scope. The policy applies to all BIE-operated K-12 schools and dormitories.

1.3 Policy. To administer any prescribed medication, the school must require a separate, completed Bureau of Indian Education Authorization to Administer Prescribed/Over-the-Counter Medication form (Medication Authorization Form) (Attachment A) for each prescription or OTC medication a student must take at school.

1.4 Authority.

- 1) 20 U.S.C. § 1232(g), Family Education Rights and Privacy Act of 1974
- 2) 15 U.S.C. § 1693(b), Health Insurance Portability and Accountability Act of 2000
- 3) 25 CFR 36.86, Homeliving Programs

1.5 Responsibilities.

- A. Director, Bureau of Indian Education** is responsible for final approval of this policy and submission of the final policy to the Associate Deputy Director.
- B. Associate Deputy Director** is responsible for the annual review of this policy for overall management improvement. The Associate Deputy Director is also responsible for monitoring the Education Line Offices for adherence to the policy.
- C. Education Line Officer** is responsible for ensuring the policy is in place at and implemented by BIE-operated schools.
- D. School Principals** are responsible for ensuring school staff members are in compliance with the policy.

1.6 Requirements and Procedures.

A. Required Medication Authorization Form (Attachment A) information

1. Name of student

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2. Date of birth
3. Reason for medication or diagnosis
4. Name of medication
5. Exact dosage to be taken in school
6. Time to take medication and frequency or exact time interval dosage is to be administered
7. If medication is given on an as-needed basis, specify the conditions or symptoms when medication is to be taken and when it may be given again ("Repeat as necessary" is usually unacceptable)
8. Duration of medication order or effective dates
9. Signature of a Licensed Medical Professional
10. Signature of a parent/guardian

Medications purchased outside the United States (U.S.) are not exempt from the requirement for a written prescription by a U.S. licensed medical professional.

All prescription medications, including physician samples, must be in an up-to-date and labeled container.

B. Boarding Schools and Dormitories

In boarding schools or dormitories, where a parent is not on campus for extended lengths of time, and the school acts in *loco parentis*, some protocols may differ based on the home living staff training and health services agreements with local health care providers who prescribe the child's medication. Therefore, written documentation that the prescribing provider has contacted the parent/guardian by telephone and consent has been obtained, may be acceptable in lieu of the parent/guardian signature.

C. Student Confidentiality

Schools and dormitories must ensure that student confidentiality is protected, as outlined in the Family Education Rights and Privacy Act, and the Health Insurance Portability and Accountability Act.

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D. Medication Administration Staff

In the absence of trained medical staff, the school principal or a designee should be trained to administer medication to students. It is imperative that any person administering medication be educated about the method of administration and contraindications to giving the medication. The principal will set aside time for the school nurse, or if there isn't one, a public health nurse, to train academic and/or dormitory staff on medication administration, which includes, amongst others, recognition of adverse side effects and allergic reactions.

The training will include the Six Rights of Assisting with Medication Administration:

1. Right Student
2. Right Medication
3. Right Dose
4. Right Time
5. Right Route
6. Right Documentation

The Six Rights are to be triple-checked each and every time a student is given a medication.

- First, when taking medication from the storage cabinet
- Second, when giving the medication to the student
- Third, when returning the medication to the storage cabinet¹

The school nurse, or designated employee, will watch the student periodically to observe side effects and effectiveness of the medication and inform the prescribing provider of any complications.

E. Off Campus Activities

The medications may be administered to students while on school provided transportation, and during participation in school sponsored field trips, school camps, and other out-of-school activities as noted on the Medication Authorization Form.

¹ New Mexico School Health Manual www.nmschoolhealthmanual.org

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In the event of field trips or other off-campus activities, the school or dormitory employee who will chaperone the event will meet with the school nurse, or designated employee, who will explain the purpose and expected effect of the medication, as well as signs of a bad reaction to the medication. The school nurse will provide the medicine to the staff member/chaperone in a sealed envelope labeled with the date, student's name, the name and dose of the medicine, the time or circumstances for the medication to be given, and a copy of the Medication Authorization Form.

F. Self-Carry/Self-Administration

Students are not permitted to self-carry and self-administer medications, with the exception of certain medications (inhalers for asthmatic students; EpiPens or Auvi-Q for anaphylaxis; medication for treatment of diagnosed migraine headaches; insulin for diabetic students). If a student carries medication, the physician must indicate on the Medication Authorization Form that the student has the ability to safely manage the medication. Students must report to the designated medication administration staff they have self-administered their medication.

Persons suffering an anaphylactic reaction may not be able to speak due to extremely rapid and **potentially life threatening** swelling of the throat and/or tongue, which can occur within seconds. Following the administration of an EpiPen or Auvi-Q, staff must seek immediate medical help.

G. OTC Medications

OTC medications or herbal medications require a physician's note that in essence "prescribes" these nonprescription medications. All OTC medications and herbal medications must be in the original up-to-date container with the name and dosage of the medication visible. The school or dormitory must have physician-approved protocols (indications, dose, and contraindications) for using OTC medications. Medications may not be administered for children at ages below which the drug is not approved (unless prescribed by a licensed medical professional). The school nurse, or designated staff, will observe the student to determine if it is appropriate to administer a particular OTC medication to a student, and to determine if the student's symptoms could be alleviated first without medicine.

H. Medication Supply

Schools and dormitories will notify parents that it is their responsibility to supply the school with prescribed medications in the original up-to-date pharmacy labeled containers, keep medications current and supply medical devices (e.g., nebulizers, insulin pumps, oxygen). Medications will be delivered to the school in-person by the parent or through

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acceptable mailing services. It is also the parents' responsibility to complete a Medication Authorization Form for each medication at the beginning of each school year.

In situations where parental notification isn't possible due to parental absence, medication authorization by a nurse will be sufficient as long as a parent has provided written permission for the school to administer medications in their absence. Medications will be kept with the school nurse, or other designated staff, as noted in Section L, below.

I. School Medication Documentation

Protocols should be established for the documentation of all medications administered at school, whether emergency or routine. Some schools use a log, and others use a computer-based student medical record system. A log must not be accessible to anyone other than the school nurse, or designated employee. Any error in medication administration at a school needs to be reported using the Medication Incident Report (Attachment B) and also to at least one common supervisor to identify patterns of errors and take corrective action. Errors with medication dosage or timing will also be reported to the parent and the medication prescriber so any necessary course of action can take place. Measures taken by school administrators after a medication error must be designed so that they do not discourage staff self-reporting of errors.

J. Individualized Health Plan

Students who self-carry and/or self-administer medication must have an Individualized Health Plan (IHP) developed by the school staff, school health care provider, Licensed Medical Professional, and a parent/guardian.

The IHP will describe the student's special health care needs, protocols for emergencies, responsibilities of principal, school nurse, teacher, aide, family, and student, including back-up plans when the trained teacher is absent.

K. Licensed Medical Professional

A licensed medical professional consists of the following: Doctor of Medicine (MD), Doctor of Dental Surgery (DDS), Doctor of Medical Dentistry (DMD), Doctor of Osteopathic Medicine (DOM), Doctor of Podiatric Medicine (DPM), physician's assistant (PA), pedodontist, oral surgeon, orthodontist, etc.

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L. Medication Storage

Controlled substances such as Methyphenidate (Ritalin, Concerta) must be kept in a narcotics cabinet. Access to a medication cabinet is limited to the school nurse or designated employee.

At the end of the school year, the school nurse will notify parents they are to pick up any unused medication. If the parents fail to pick up the medication within one week after the end of the school year, the School Nurse is to destroy the medication following the *U.S. Food and Drug Administration, How to Dispose of Unused Medicines Guidelines*:

1. Take the medicine out of the original container;
2. Mix the drug with an undesirable substance, such as cat litter or unused coffee grounds;
3. Put the mixture into a disposable container with a lid, such as an empty margarine tub or a sealable plastic bag;
4. Conceal or remove any personal information, including Rx number, on the empty containers by covering it with black permanent marker or duct tape, or scratching it off; and
5. Place the sealed container with the mixture and the empty drug containers in the trash.²

1.7 Notification. The school principal shall annually notify all students, faculty, staff, and parents about this medication policy. The school principal will also document that the policy has been reviewed with staff and students during staff and student meetings. The documentation shall include an agenda, a sign-in sheet, and any materials that were distributed. The school principal should notify students, faculty, staff, and parents of the policy by:

1. Publication in student handbooks;
2. Publication in the school newsletter;
3. Publication in faculty handbooks;
4. Posting it for students and staff on bulletin boards in the school or dormitory teachers' lounge, offices, main office, and other commonly-used areas; and
5. Providing it to students as part of their registration materials for school.

²<http://www.fda.gov/forconsumers/consumerupdates/ucm101653.htm#guidelines>

ATTACHMENT A
BUREAU OF INDIAN EDUCATION
AUTHORIZATION TO ADMINISTER PRESCRIBED/OVER-THE-COUNTER MEDICATION

PART I—TO BE COMPLETED BY THE PARENT/GUARDIAN

I hereby request and authorize designated and properly instructed school personnel to administer prescribed medication as directed by the prescribing physician or other duly licensed provider (PART II below). I certify that I have legal authority to consent to the administration of prescribed medication following the provider's order. I understand additional prescriber/parent authorizations will be necessary for each medication to be administered, and if the dosage of the medication is changed. If necessary, I authorize **the designated school health care official to communicate with the prescriber or the student's health care provider as allowed by HIPAA.**

STUDENT INFORMATION			
Student Name _____		Date of Birth _____	
Last	First	MI	Gender M ___ F ___
School _____	Grade _____	School Year _____	Height (inches) _____
Weight (lbs) _____			
List all medication(s) student is taking, including over-the-counter medication(s): _____ _____			
List any known drug allergies/reactions: _____			
Parent/Guardian Signature _____		Date _____	
Contact Number(s): _____ (Day) _____ (Evening)			

PART II—TO BE COMPLETED BY THE PRESCRIBER

PLEASE USE A SEPARATE FORM FOR EACH MEDICATION	
Name of Medication: _____ Diagnosis: _____	
Dosage: _____ Time(s)/Frequency to be given: _____	
Route of Administration: _____ PRN (as needed) ___Yes ___No If PRN, (signs/symptoms): _____	
Side Effects: _____	
Begin Medication: _____ Date	Stop Medication: _____ Date
Special Instructions: Refrigeration required? ___Yes ___No Is medicine a controlled substance? ___Yes ___No Is this an emergency self carry/self administration medication? ___Yes ___No Has student been instructed in the proper self administration of medicine? ___Yes ___No	
Prescriber's authorization for self carry/self-administration of emergency medication: _____ Signature Date	
Prescriber's Name/Title: _____ Phone _____ (Type or Print)	
Address: _____ Fax _____	
Prescriber's signature: _____ Date _____	

PART III—TO BE COMPLETED BY School Nurse/Other Duly Licensed Health Care Provider

- ☐ Parts I and II above are completed, including signatures.
- ☐ Prescription medication is properly labeled by a pharmacist and within the expiration date.
- ☐ Medication label and prescriber order are consistent.
- ☐ Over-the-counter medication is in an original container with manufacturer's dosage label intact.

Principal/Authorized School Personnel Signature _____ **Date** _____

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New

**ATTACHMENT B
MEDICATION INCIDENT REPORT**

NAME _____

LAST

FIRST

M.

HOME ADDRESS: _____ ZIP CODE _____

GRADE _____ BIRTHDATE: _____ MALE ____ FEMALE ____

TIME OF INCIDENT: _____ DATE OF INCIDENT: _____

TYPE OF INCIDENT: (CIRCLE)

Wrong dosage

Wrong student

Wrong medication

Wrong time

Unable to locate student

Wrong route

Wrong documentation

Missed dose

Reported by:

NARRATIVE DESCRIPTION:

RENT/GUARDIAN Notification YES[<input type="checkbox"/>] NO[<input type="checkbox"/>] By Whom	Date	Time
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Comments:

MD notification YES[☐] NO[☐] By Whom

Comments:

IF APPLICABLE Poison Control notified: **1-800-222-1222** YES[☐] NO[☐]

Recommendations:

ACTIONS/OBSERVATIONS:

PLAN OF ACTION COMPLETED:

Signature: _____ Date: _____ Time: _____

Supervising Nurse: _____ Date: _____

ATTACHMENT B continued
BUREAU OF INDIAN EDUCATION
AUTHORIZATION TO ADMINISTER PRESCRIBED/OVER-THE-COUNTER
MEDICATION

INFORMATION AND PROCEDURES

1. No medication will be administered in school or during school-sponsored activities without the parent's/guardian's written authorization and a written physician or other licensed health care provider order. This includes both prescription and over-the-counter (OTC) medications. An exception will be made for students living at a boarding school or a dormitory and whose parent/guardian has granted permission for emergency care for the student.
2. The parent/guardian is responsible for completing Part I and obtaining the physician's statement on Part II. This is required every school year for each new or continuing order or if there is a change in dosage or time of administration during the school year. Information necessary includes: child's name, diagnosis, medication name, dosage, time of administration, duration of medication, side effects, physician signature, and date.
3. The medication must be delivered to the school by the parent/guardian or through acceptable mailing services and under special circumstances by an adult designated by the parent/guardian.
4. All prescription medication must be provided in an original container with the pharmacist's label attached. If applicable, a duplicate bottle may be requested so some of the medicine can be kept at home. Non-prescription OTC medication must be in the container with the manufacturer's original label so dosage information and expiration date are viewable.
5. The parent/guardian is responsible for collecting any unused portion of a medication within one week after expiration of the physician's order or at the end of the school year. Medication not claimed within that time period will be destroyed using approved disposal methods by the FDA or EPA (see BIE Medication Administration policy).
6. A physician's or other duly licensed provider's order and parental permission are necessary for self-carry/self-administered emergency medications such as inhalers for asthma and EpiPens or Auvi-Q for anaphylaxis, Insulin for diabetes, and Sumatriptan for migraines. It is imperative the student understands the necessity for reporting to the health staff or teacher that they have self-administered their inhaler or have self-administered an EpiPen, so emergency services can be sought. Students that self-carry/self-administer emergency medications will have an Individualized Health Plan so school nurse/school health assistant can communicate with school staff.
7. When applicable, pursuant to specifications on the medication authorization form, the school nurse or other licensed health care professional will assess the student to determine if it is appropriate to administer a particular OTC medication to a student, and to determine if the student's symptoms could be alleviated first without a medicine. A non-licensed provider will observe the student and report their observations to a nurse or other licensed health care provider.